Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Judith First name M Middle name		First name Middle name
	Bring your picture identification to your meeting with the trustee.	Robotnik Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you hav	e Judi M Robotnik		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2717		

Debtor 1 Judith M Robotnik Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		8401 18 Mile Rd #246	
		Sterling Heights, MI 48313 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Macomb	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

7.	The chapter of the Bankruptcy Code you are choosing to file under				of each, see <i>Notice Req</i> page 1 and check the ap		342(b) for Individuals Filing t	for Bankruptcy			
	choosing to the under	■ Chapter 7 □ Chapter 11									
		☐ Chapter 12									
		☐ Chap	ter 13								
8.	How you will pay the fee	How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in you about how you may pay. Typically, if you are paying the fee yourself, you may pay with casl order. If your attorney is submitting your payment on your behalf, your attorney may pay wit a pre-printed address.									
					allments. If you choose (Official Form 103A).	this option, sign and a	attach the Application for Ind	dividuals to Pay			
		□ Ire	equest the	t my fee be wai	ved (You may request t		are filing for Chapter 7. By la less than 150% of the officia				
		ар	plies to yo	ur family size and	d you are unable to pay	the fee in installments). If you choose this option, B) and file it with your petition	you must fill out			
9.	Have you filed for bankruptcy within the	■ No.									
	last 8 years?	☐ Yes.									
			District				Case number				
			District		When						
			District		When _		Case number				
10.	Are any bankruptcy cases pending or being	■ No									
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.									
			Debtor				Relationship to you				
			District		When		Case number, if known _				
			Debtor				Relationship to you				
			District		When _		Case number, if known				
11.	Do you rent your residence?	■ No.	Go to	ine 12.							
	residence:	☐ Yes.	Has yo	ur landlord obtai	ned an eviction judgme	nt against you and do	you want to stay in your res	sidence?			
				No. Go to line 1	2.						
	Yes. Fill out <i>Initial Statement About an Eviction Judgment Against Y</i> bankruptcy petition.						ainst You (Form 101A) and	file it with this			

Case number (if known)

Debtor 1 Judith M Robotnik

Der	Judith W Robotnie	(Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Owr	ı as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	siness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code		
	it to this petition.		Chec		ox to describe your business:		
					ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))		
					lefined in 11 U.S.C. § 101(53A))		
				-	er (as defined in 11 U.S.C. § 101(6))		
				None of the abov	0		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir ns, cash-fl	ndicate that you are ow statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 Judith M Robotnik

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Judith M Robotnik	(Case number	(if known)			
Par	t 6: Answer These Questi	ons for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	individual primarily for a perso	nsumer debts? Consumer debts are defir nal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		siness debts? Business debts are debts t tment or through the operation of the busi				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	e that are not consumer debts or business	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000	1 25,001-50,000			
	you estimate that you owe?	☐ 50-99		5001-10,000	5 0,001-100,000			
	••••	□ 100-1 □ 200-9		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			.001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have ex	camined this petition, and I decla	are under penalty of perjury that the inform	nation provided is true and correct.			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupt and 3571	cy case can result in fines up to 1.	concealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years.	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Judith I	th M Robotnik M Robotnik e of Debtor 1	Signature of Debtor	2			
		Executed	d on June 21, 2017	Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

Debtor 1 _Judith M Robotnil	(Case number (if known)	
For your attorney, if you are	I, the attorney for the debtor(s) named in this petition	n, declare that I have informed the debtor((s) about eligibility to proceed

represented by one

If you are not represented by an attorney, you do not need to file this page.

under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniela Dimovski Signature of Attorney for Debtor	Date	June 21, 2017 MM / DD / YYYY
Daniela Dimovski Printed name		
Daniela Dimovski Attorney at Law P.C.		
44200 Garfield Road Suite 124 Clinton Township, MI 48038 Number, Street, City, State & ZIP Code		
Contact phone 586-738-6329	Email address	danieladimovski@gmail.com
P60278		

Fill	in this infor	mation to identify your	case:			
Deb	otor 1	Judith M Robotni				
Deb	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
	se number _				- 0	
(If Kn	iown)				_	ck if this is an nded filing
				-		J
Of	ficial Fo	rm 106Sum				
Su	mmary o	of Your Assets	and Liabilities an	nd Certain Statistical Information		12/15
info	rmation. Fill r original for	out all of your schedul	es first; then complete th	are filing together, both are equally responsible for information on this form. If you are filing amend at the top of this page.		
					Your	assets
						of what you own
1.	Schedule A	A/B: Property (Official Fo	orm 106A/B) rom Schedule A/B		\$	68,000.00
					\$	24,794.94
	1c. Copy lin	ne 63, Total of all propert	y on Schedule A/B		\$	92,794.94
Por	t 2: Summ	narize Your Liabilities	•		· 	
ı aı	tz. Juliii	iarize rour Liabilities			V	liabilitiaa
						liabilities int you owe
2.			laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	79,697.73
3.			Unsecured Claims (Official 1 (priority unsecured claim	I Form 106E/F) s) from line 6e of Schedule E/F	\$	0.00
	3b. Copy th	ne total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	33,245.07
				Your total liabilities	\$	112,942.80
Par	t 3: Summ	narize Your Income and	Expenses			
4.		Your Income (Official Fo	,	<i>I</i>	\$	1,485.00
5.		: Your Expenses (Official monthly expenses from li			\$	1,558.00
Par	t 4: Answe	er These Questions for	Administrative and Stati	stical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with yo	ur other s	chedules.
7.	YesWhat kind	of debt do you have?				
	■ Your o			debts are those "incurred by an individual primarily for	a persona	al, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

813.88

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1	Judith	M Rol	ootnik					
	First Name			Name	Last Name			
Debtor 2 Spouse, if filin	ng) First Name	Э	Middle	Name	Last Name			
Inited Stat	tes Bankruptcy Co	ourt for	the: EASTERN	DISTR	ICT OF MICHIGAN			
ase numb	per							☐ Check if this is a amended filing
Official	Form 106	6A/B						
ched	dule A/B	: Pr	operty					12/15
art 1: Des					I Estate You Own or Have an Interest In			
□ No. Go		aı or eqi	uitable interest in a	ny resid	dence, building, land, or similar property?			
_	Vhere is the property							
— 165. W	vnere is the property	y?						
.1 8401	18 Mile Rd #24	46	cription	What		the amount	of any secure	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
.1 8401 Street a	18 Mile Rd #24	46	48313-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va	t of any secure Who Have Clair lue of the perty?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
.1 8401 Street a	18 Mile Rd #24	46 other desc			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current va entire prop	t of any secure. Who Have Clair lue of the perty? 68,000.00 he nature of y	d claims on Schedule D: ms Secured by Property. Current value of the
.1 8401 Street a	18 Mile Rd #24	46 other desc	48313-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire prop	t of any secure. Who Have Clair lue of the perty? 68,000.00 he nature of yee simple, tene), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$68,000.0
.1 8401 Street a	18 Mile Rd #24 address, if available, or o	46 other desc	48313-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire prop	t of any secure. Who Have Clair lue of the perty? 68,000.00 he nature of yee simple, tene), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$68,000.0
Sterli City	18 Mile Rd #24 address, if available, or o	46 other desc	48313-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire prop Security Securi	t of any secure. Who Have Clair lue of the perty? 68,000.00 he nature of yee simple, tene), if known. ble	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$68,000.0

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	_	uaith ivi Ro			ase number (# known)	
3. C a	ars, vans	trucks, trac	tors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	Chevrole	t	Who has an interest in the property? Check one		claims or exemptions. Put ured claims on Schedule D:
	Model:	Cruze		Debtor 1 only		laims Secured by Property.
	Year:	2014	24000	Debtor 2 only	Current value of the	Current value of the
	• • •	nate mileage: formation:	31000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Other in	omation.		At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$12,000.00	\$12,000.00
5 A .p	3: Descri	be Your Person have any l	ed for Part 2. Write to a serie of the series of th	terest in any of the following items?		\$12,000.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
_	l No Yes. De	scribe				
			tables chairs be	eds couches		\$5,000.00
E	l No	Televisions a		eo, stereo, and digital equipment; computers, printe nedia players, games	ers, scanners; music collec	ctions; electronic devices
9. E (ixamples: I _{No} I Yes. De quipment	other collectionscribe for sports a	ons, memorabilia, co	prints, or other artwork; books, pictures, or other ar llectibles and other hobby equipment; bicycles, pool tables, go		
10. F	No Yes. De	musical instruscribe	uments	tion, and related equipment		
	No					
Offici	al Form 1	06A/B		Schedule A/B: Property		page 2

De	ebtor 1	Judith M Robo	tnik		Case number (if known)	
	☐ Yes.	Describe				
11.	□ No	oles: Everyday cloth	es, furs, leather coats, design	ner wear, shoes, accessories		
	■ Yes.	Describe				
		Ç	general clothing			\$1,000.00
	□ No	oles: Everyday jewe Describe	costume jewlery \$100 wedding ring	ment rings, wedding rings, heirloom je	ewelry, watches, gems, go	ld, silver
		6	ings earrings oracelets			\$4,100.00
14.	Examp ■ No □ Yes. Any oth ■ No	orm animals oles: Dogs, cats, bird Describe ther personal and h	nousehold items you did no	ot already list, including any health	aids you did not list	
15	. Add t for Pa	the dollar value of art 3. Write that nu	all of your entries from Par mber here	t 3, including any entries for pages	you have attached	\$11,100.00
		scribe Your Financia wn or have any leg	I Assets al or equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No		ve in your wallet, in your hom	e, in a safe deposit box, and on hand	when you file your petition	n
					Cash	\$20.00
	Examp	its of money oles: Checking, savi institutions. If y	ngs, or other financial accour ou have multiple accounts w	nts; certificates of deposit; shares in c vith the same institution, list each. Institution name:	redit unions, brokerage ho	ouses, and other similar
			checking and 17.1. savings	Chase		\$201.00
18.			publicly traded stocks	erage firms, money market accounts		
	_		Institution or issuer na	nme:		

De	ebtor 1	Judith M Robotnik		C	ase number (if known)	
19.	•	ublicly traded stock and inter- venture	ests in incorporated and unine	corporated businesses,	including an interest in a	n LLC, partnership, and
	No					
	☐ Yes.	Give specific information abou Name of		•	% of ownership:	
	Negoti Non-n ■ No	iable instruments include person legotiable instruments are those	nd other negotiable and non-inal checks, cashiers' checks, property ou cannot transfer to someone	omissory notes, and mon		
	⊔ Yes.	Give specific information about Issuer na				
		ment or pension accounts ples: Interests in IRA, ERISA, K	eogh, 401(k), 403(b), thrift savin	gs accounts, or other per	nsion or profit-sharing plans	
	_	List each account separately.				
	□ 1es.	Type of acc	count: Institution	name:		
	Your s		n have made so that you may co s, prepaid rent, public utilities (ele			r others
			Institution	name or individual:		
23.	_	ties (A contract for a periodic pa	ayment of money to you, either for	or life or for a number of y	years)	
	■ No □ Yes	Issuer name and	d description.			
		ts in an education IRA, in an a C. §§ 530(b)(1), 529A(b), and 5	account in a qualified ABLE posts (29(b)(1).	ogram, or under a qual	ified state tuition program	
	Yes	Institution name	and description. Separately file	the records of any interes	sts.11 U.S.C. § 521(c):	
	Trusts	, equitable or future interests	in property (other than anythi	ng listed in line 1), and	rights or powers exercisa	ble for your benefit
		Give specific information abou	t them			
			nde secrets, and other intellect ebsites, proceeds from royalties		rs	
		Give specific information abou	t them			
	Examp	ses, franchises, and other gen ples: Building permits, exclusive	e licenses, cooperative association	on holdings, liquor licens	es, professional licenses	
	■ No □ Yes.	Give specific information abou	t them			
Mc	onev or	property owed to you?				Current value of the
	, .	p				portion you own? Do not deduct secured claims or exemptions.
	Tax ref	funds owed to you				
	Yes.	Give specific information about	them, including whether you alr	eady filed the returns and	d the tax years	
					1	
			2017 tax refud prorated		federal and state	\$1,000.00

De	ebtor 1	Judith M Robotnik	Case number (if known)	
29.		support oles: Past due or lump sum alimony, spousal support, child support, m	aintenance, divorce settlement, property	settlement
	☐ Yes.	Give specific information		
30.		amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits, benefits; unpaid loans you made to someone else	sick pay, vacation pay, workers' compe	nsation, Social Security
	_	Give specific information		
31.		sts in insurance policies poles: Health, disability, or life insurance; health savings account (HSA)	; credit, homeowner's, or renter's insurar	nce
	Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		AARP Life	daughter	\$473.94
32.	If you somed	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurar one has died. Give specific information	ice policy, or are currently entitled to rec	eive property because
33.	Exam _l ■ No	s against third parties, whether or not you have filed a lawsuit or roles: Accidents, employment disputes, insurance claims, or rights to surprise each claim		
34.	■ No	contingent and unliquidated claims of every nature, including cou	interclaims of the debtor and rights to	set off claims
35.	Any fir	nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, including any en art 4. Write that number here		\$1,694.94
Pa	art 5: De	scribe Any Business-Related Property You Own or Have an Interest In. Lis	t any real estate in Part 1.	
	•	own or have any legal or equitable interest in any business-related properto to Part 6.	y?	
	☐ Yes. (Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or H ou own or have an interest in farmland, list it in Part 1.	ave an Interest In.	
46.	_ `	a own or have any legal or equitable interest in any farm- or comn Go to Part 7.	nercial fishing-related property?	
	☐ Yes	s. Go to line 47.		
Da	ort 7:	Describe All Bronarty Vou Own or Have an Interest in That You Did Not	ist Abovo	

Deb	otor 1 Judith M Robotnik		Case number (if known)		
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership				
	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part 7. Write that	nt number here			\$0.00
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$68,000.00
56.	Part 2: Total vehicles, line 5	\$12,000.00			
57.	Part 3: Total personal and household items, line 15	\$11,100.00			
58.	Part 4: Total financial assets, line 36	\$1,694.94			
59.	Part 5: Total business-related property, line 45	\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7: Total other property not listed, line 54 +	\$0.00			
62.	Total personal property. Add lines 56 through 61	\$24,794.94	Copy personal property to	otal	\$24,794.94
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$92,794.94

Fill in this infor	mation to identify your	case:		
Debtor 1	Judith M Robotni	ik		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	∕ You Claim as Exempt
-------------------------------	-----------------------

	You are claiming state and rederal nonbar				
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	8401 18 Mile Rd #246 Sterling Heights, MI 48313 Macomb County	\$68,000.00		\$2,274.15	11 U.S.C. § 522(d)(1)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	tables chairs beds couches Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	2 tvs 1 laptop	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	general clothing Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
	Line IIIIII Scriedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit	
	costume jewlery \$100 wedding ring	\$4,100.00		\$1,600.00	11 U.S.C. § 522(d)(4)
	rings earrings bracelets			100% of fair market value, up to any applicable statutory limit	
	Line from Schedule A/B: 12.1				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
_	ash ne from <i>Schedule A/B</i> : 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
LII	ne nom <i>Schedule A/B</i> . 10.1			100% of fair market value, up to any applicable statutory limit	
	necking and savings: Chase	\$201.00		\$201.00	11 U.S.C. § 522(d)(5)
Line Irom Scriedule Arb. 11.1				100% of fair market value, up to any applicable statutory limit	
	deral and state: 2017 tax refud	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
•	ne from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	ARP Life eneficiary: daughter	\$473.94		\$473.94	11 U.S.C. § 522(d)(8)
	ne from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption of subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	3 years after that for ca	ises fi	,	,

FIII	in this information to identif					
Deb	tor 1 Judith M R	obotn	ik Middle Name Last Name			
Deb	tor 2		Middle Name Last Name			
	use if, filing) First Name		Middle Name Last Name			
Unit	ed States Bankruptcy Court fo	or the:	EASTERN DISTRICT OF MICHIGAN			
Cas	e number					
(if kno					☐ Check	if this is an
					amend	ded filing
○ #:	sial Farm 100D					
	cial Form 106D					
Sc	nedule D: Credit	ors	Who Have Claims Secure	ed by Property	У	12/15
			two married people are filing together, both are			
	eded, copy the Additional Page, per (if known).	fill it o	ut, number the entries, and attach it to this form.	On the top of any addition	nal pages, write your na	me and case
	any creditors have claims secu	red by	your property?			
	☐ No. Check this box and sul	bmit th	is form to the court with your other schedules.	You have nothing else to	o report on this form.	
	Yes. Fill in all of the inform	ation b	elow.			
Part						
			ore than one secured claim, list the creditor separate	Column A	Column B	Column C
for e	ach claim. If more than one credit	tor has	a particular claim, list the other creditors in Part 2. As all order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1	Andover Heights Condo	0	Describe the property that secures the claim:	\$0.00	\$68,000.00	\$0.00
	Creditor's Name		8401 18 Mile Rd #246 Sterling			
	c/o Stamper and		Heights, MI 48313 Macomb County			
	Company 42822 Garfield Ste 105		As of the date you file, the claim is: Check all that			
	Clinton Township, MI		apply.			
	48038		Contingent			
	Number, Street, City, State & Zip Cod	le	☐ Unliquidated			
\A/I: -			Disputed			
_	o owes the debt? Check one.		Nature of lien. Check all that apply.	d		
_	Debtor 1 only Debtor 2 only			secured		
_	Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)			
_	t least one of the debtors and and	other	☐ Judgment lien from a lawsuit			
	check if this claim relates to a		■ Other (including a right to offset) condo as	sociation fee		
(community debt					
Date	debt was incurred		Last 4 digits of account number			
0.0	Luntington Bonk		Describe the manager that assume the plain.	¢42.074.00	¢42,000,00	¢4 074 99
2.2	Huntington Bank Creditor's Name		Describe the property that secures the claim: 2014 Chevrolet Cruze 31000 miles	\$13,971.88	\$12,000.00	\$1,971.88
			2014 One Violet Oraze 91000 iiiies			
	7575 Huntington Park		As of the date you file, the claim is: Check all that			
	Drive		apply.			
	Columbus, OH 43235		Contingent			
	Number, Street, City, State & Zip Cod	ie	☐ Unliquidated ☐ Disputed			
Who	owes the debt? Check one.		Nature of lien. Check all that apply.			
	ebtor 1 only		\square An agreement you made (such as mortgage or s	secured		
	ebtor 2 only		car loan)			
	Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mechanic's lien)			
	t least one of the debtors and and	other	Judgment lien from a lawsuit			
	check if this claim relates to a community debt		Other (including a right to offset) title			
Date	debt was incurred 20116		Last 4 digits of account number 2321	I		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1 Judith M Robotnik		Case number (if know)			
First Name Middle	Name Last Name				
2.3 Union Home Mortgage	Describe the property that secures the claim:	\$65,725.85	\$68,000.00	\$0.00	
Creditor's Name	8401 18 Mile Rd #246 Sterling Heights, MI 48313 Macomb County				
PO Box 77404 Trenton, NJ 08628	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) mortgag	je			
Date debt was incurred 2016	Last 4 digits of account number 023	9			
Add the dollar value of your entries in	Column A on this page. Write that number here:	\$79,697.	73		
If this is the last page of your form, ad Write that number here:	d the dollar value totals from all pages.	\$79,697.	73		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in t	his information to id	lentify your case	e:				
Debtor	1 Judith	M Robotnik					
	First Name		Middle Name	Last Name			
Debtor 2 (Spouse if		<u> </u>	Middle Name	Last Name			
United	States Bankruptcy Co	ourt for the: E	ASTERN DISTRICT OF N	MICHIGAN			
Case no	umber						
(if known)						-	Check if this is an amended filing
Scheo Be as con any exec Schedule Schedule	mplete and accurate a utory contracts or une e G: Executory Contrac D: Creditors Who Ha	ditors Who s possible. Use Pa expired leases that ets and Unexpired we Claims Secured	o Have Unsecure art 1 for creditors with PRIC could result in a claim. Al Leases (Official Form 1060 by Property. If more space	ORITY claims and I so list executory of G). Do not include is needed, copy	contracts on Scheo any creditors with the Part you need,	dule A/B: Property (Office partially secured claims fill it out, number the er	ial Form 106A/B) and on s that are listed in ntries in the boxes on the
	d case number (if know	vn).	you have no information to	o report in a Part, o	do not file that Par	t. On the top of any add	itional pages, write your
	any creditors have price						
	No. Go to Part 2.	my anocoarca on	anno agamot you .				
Part 2:		IONPRIORITY U	nsecured Claims				
3. Do a	any creditors have nor	priority unsecure	d claims against you?				
	No. You have nothing to	report in this part.	Submit this form to the court	with your other sche	edules.		
■ Y				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
unse	ecured claim, list the cre one creditor holds a pa	ditor separately for	s in the alphabetical order of each claim. For each claim li e other creditors in Part 3.If y	sted, identify what t	ype of claim it is. Do	o not list claims already in	cluded in Part 1. If more
							Total claim
4.1	A Convergys Co	mpany	Last 4 digits of	account number	8354		\$0.00
	Nonpriority Creditor's N	ame		1.1.4.1	0047	_	
	400 N Rogers Rd PO Box 3330		When was the	dept incurred?	2017		_
_	Olathe, KS 66063						
	Number Street City Sta		As of the date y	ou file, the claim i	s: Check all that ap	pply	
	Who incurred the deb	t? Check one.	П.				
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debto	•	☐ Disputed Type of NONPE	RIORITY unsecured	d claim:		
	At least one of the o		□ 04d==4.l===		. V.u		
	☐ Check if this claim debt	is ioi a commun	ity		ration agreement o	r divorce that you did not	
	Is the claim subject to	offset?	report as priority	claims			
	■ No		☐ Debts to pen	sion or profit-sharin	g plans, and other s	similar debts	
	☐ Yes		Other Speci	Collection	Agency for Sy	nchrony Bank	

AUCTOR DE COMP		**
Alliance Health Professionals Nonpriority Creditor's Name	Last 4 digits of account number 9628	\$64.58
2689 Solution Center	When was the debt incurred? 2016	
Chicago, IL 60677 Number Street City State Zlp Code	As of the date you file the claim is Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you div	d not
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Allied Interstate	Last 4 digits of account number 0882	\$0.00
Nonpriority Creditor's Name 3000 Corporate Exchange Dr 5th	When was the debt incurred? 2017	
Floor	Which was the dest incurred.	
Columbus, OH 43231		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	lacksquare Obligations arising out of a separation agreement or divorce that you did	d not
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Agency for Synchrony Bank	
Allied Interstate	Last 4 digits of account number 7857	\$0.00
Nonpriority Creditor's Name 3000 Corporate Exchange Dr 5th	When was the debt incurred? 2017	
Floor	ZOT7	
Columbus, OH 43231		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Agency for Synchrony Bank	

Judith M Robotnik		Case number (if know)	
AmeriCredit	Last 4 digits of account number	5986	\$12,243.5
Nonpriority Creditor's Name PO Box 78143	When was the debt incurred?	Over the last few years	
Phoenix, AZ 85062	when was the dept incurred:	Over the last lew years	
lumber Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	Other. Specify Vehicle Def	ficiency	
Avant	Last 4 digits of account number	0027	\$636.6
Nonpriority Creditor's Name	- When were the debt in surred?	2015	
222 N Lasalle Street, Ste 1700 Chicago, IL 60601	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Misc Loan		
Capital One Bank	Last 4 digits of account number	7415	\$2,977.7
Nonpriority Creditor's Name P.O. Box 6492	When was the debt incurred?	Over the last few years	
Carol Stream, IL 60197-6492	mon was the dept meaned.	Over the last lew years	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Credit card		

Judith M Robotnik		Case number (if know)	
Capital One Bank	Last 4 digits of account number	1574	\$1,375.71
Nonpriority Creditor's Name P.O. Box 6492 Carol Stream, IL 60197-6492	When was the debt incurred?	Over the last few years	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Credit card	purchases	
Capital One Retail Services	Last 4 digits of account number	1809	\$182.95
Nonpriority Creditor's Name	When was the debt incurred?	Over the last few years	
Carol Stream, IL 60197-4144	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
_			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐Yes	Other. Specify Credit card	purchases	
Cardmember Service		4432	\$949.55
Nonpriority Creditor's Name	Last 4 digits of account number		ψυ-τυ.υυ
PO Box 94014 Palatine, IL 60094	When was the debt incurred?	Over the last few years	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	1 1 - /	• • • • • • • • • • • • • • • • • • • •	

Cardmember Service	Last 4 digits of account number	8284	\$3,203.
Nonpriority Creditor's Name PO Box 94014 Palatine, IL 60094	When was the debt incurred?	Over the last few years	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit card	purchases	
Cavalry Portfolio	Last 4 digits of account number	5986	\$0.
Nonpriority Creditor's Name	_		
PO Box 27288 Tempe, AZ 85285	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection	Agency for Americredit	
Comenity Bank	Last 4 digits of account number	4533	\$107.
Nonpriority Creditor's Name Bankruptcy Department PO Box 183043	When was the debt incurred?	Over the last few years	
Columbus, OH 43218-3043			
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
— 1817	- 20010 to periodori or profit dilatin	.g r, and anion animan dobto	

Concentra Urgent Care	Last 4 digits of account number	0763	\$20.00
Nonpriority Creditor's Name PO Box 669 Addison, TX 75001	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Discover Card	Last 4 digits of account number	6450	\$504.16
Nonpriority Creditor's Name PO Box 6103 Carol Stream, IL 60197	When was the debt incurred?	Over the last few years	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit card	purchases	
DSRM National Bank	Last 4 digits of account number	4248	\$195.65
Nonpriority Creditor's Name			Ψ.00.00
PO Box 300	When was the debt incurred?	Over the last few years	
Amarillo, TX 79105 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.5 or the date yearing, the claim.	o. Chook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	■ Other. Specify Credit card	purchases	

1 Judith M Robotnik		Case number (if know)	
EGS Financial Care, Inc	Last 4 digits of account number	4827	\$0.0
Nonpriority Creditor's Name PO Box 1020 Dept 806 Horsham, PA 19044	When was the debt incurred?	2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Collection	Agency for Synchrony Bank	
Fite Eye Center	Last 4 digits of account number	1048	\$151.2
Nonpriority Creditor's Name PO Box 380803 Clinton Township, MI 48038	When was the debt incurred?	2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical		
Ghanshyam Patel MD PC	Last 4 digits of account number	9580	\$203.0
Nonpriority Creditor's Name PO Box 380476 Clinton Township, MI 48038	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical		

or 1 Judith M Robotnik		Case number (if know)		
Henry Ford Health System	Last 4 digits of account number	6379	\$309.98	
Nonpriority Creditor's Name PO Box 553920 Detroit, MI 48255-3920	When was the debt incurred?	2017		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Medical			
Home Depot Credit Services	Last 4 digits of account number	5011	\$213.8	
Nonpriority Creditor's Name PO Box 78011 Phoenix, AZ 85062	When was the debt incurred?	Over the last few years		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Credit card	purchases		
Kohl's	Last 4 digits of account number	5858	\$236.0	
Nonpriority Creditor's Name PO Box 2983 Milwaukee, WI 53201	When was the debt incurred?	Over the last few years		
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
oranii canjeet te orisetti	roport as priority dialilis			
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		

Macy's	Last 4 digits of account number	3640	\$323.0
Nonpriority Creditor's Name PO Box 78008 Phoenix, AZ 85062	When was the debt incurred?	Over the last few years	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	purchases	
Receivable Solutions Specialist, Inc Nonpriority Creditor's Name	Last 4 digits of account number	0763	\$0.0
PO Box 669	When was the debt incurred?	2017	
Natchez, MS 39121 Number Street City State Zlp Code	As of the data you file the claim i	Charle all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан тлат арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other Specify Care	Agency for Concentra Urgent	
Sears Credit Cards	Last 4 digits of account number	0393	\$2,076.1
Nonpriority Creditor's Name PO Box 78051	When was the debt incurred?	Over the last few years	
Phoenix, AZ 85062 Number Street City State Zlp Code	As of the date you file, the claim i	Chook all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	nurchases	

Last 4 digits of account number	8484	\$284.5
When was the debt incurred?	Over the last few years	
As of the date you file, the claim is: Check all that apply		
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
••	d claim:	
☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify Credit card	purchases	
Last 4 digits of account number	0882	\$2,486.6
When was the debt incurred?	Over the last few years	
	in Charle all that apply	
As of the date you file, the claim	s: Спеск ан тат арріу	
Contingent		
	d claim:	
☐ Student loans		
☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
Debts to pension or profit-sharing	g plans, and other similar debts	
Other. Specify Credit card	purchases	
Last 4 digits of account number	4827	\$1,070.7
When was the debt incurred?	Over the last few years	
As of the date you file, the claim i	is: Check all that apply	
Contingent		
☐ Unliquidated		
☐ Disputed		
	d claim:	
☐ Student loans		
Obligations arising out of a sena	ration agreement or divorce that you did not	
	•	
report as priority claims Debts to pension or profit-sharin	o plans, and other similar debts	
	When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Credit card When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Debts to pension or profit-sharin Debts to pension or profit-sharin Credit card Cother. Specify Credit card Credit card Cother. Specify Credit card Cother. Specify Credit card Cother. Specify Credit card Cother C	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit card purchases Last 4 digits of account number When was the debt incurred? Over the last few years As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit card purchases Last 4 digits of account number When was the debt incurred? Over the last few years As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans

Official Form 106 E/F

Synchrony Bank	Last 4 digits of account number	7857	\$1,231.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965061	When was the debt incurred?	Over the last few years	
Orlando, FL 32896-5061 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's	S. Olleck all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Credit card	purchases	
Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	1748	\$391.64
Attn: Bankruptcy Dept. PO Box 965061	When was the debt incurred?	Over the last few years	
Orlando, FL 32896-5061 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit card	purchases	
Synchrony Bank	Last 4 digits of account number	1153	\$213.59
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965061	When was the debt incurred?	Over the last few years	
Orlando, FL 32896-5061 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
_	Пол		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u 0.u	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	agrooment of divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit card	purchases	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	or 1 Judith M Robotnik		Case number (if know)	
4.3	Synchrony Bank	Last 4 digits of account number	6672	\$321.45
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965061 Orlando, FL 32896-5061	When was the debt incurred?	Over the last few years	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.3	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	8354	\$737.28
	Attn: Bankruptcy Dept. PO Box 965061	When was the debt incurred?	Over the last few years	
	Orlando, FL 32896-5061 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit card	purchases	
4.3	Synchrony Bank	Last 4 digits of account number	7971	\$146.62
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965061	When was the debt incurred?	Over the last few years	
	Orlando, FL 32896-5061 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	purchases	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Target Card Services	Last 4 digits of account number	8672	\$386.0
Nonpriority Creditor's Name PO Box 660170	When was the debt incurred?	Over the last few years	
Dallas, TX 75266-0170	mon was the assembarrea.	Over the last lew years	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Credit card	purchases	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	33,245.07
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	33,245.07

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this information to identify your case:									
Debtor 1 Judith M Robotnik									
First Name	Middle Name	Last Name							
First Name	Middle Name	Last Name							
kruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN							
				☐ Check if this is an amended filing					
	Judith M Robotni First Name	Judith M Robotnik First Name Middle Name First Name Middle Name	Judith M Robotnik First Name Middle Name Last Name First Name Middle Name Last Name	Judith M Robotnik First Name Middle Name Last Name First Name Middle Name Last Name					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Name, Number	whom you have the street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	•				
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Debtor 1	Judith M Robotn	ik			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	eates Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		
Case nun	mber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	ebtors			12/15
people are ill it out, a our nam	and number the entries in the e and case number (if known)	ally responsible for sup boxes on the left. Attac). Answer every questio	oplying correct informat ch the Additional Page t n.	ion. If more space is ne o this page. On the top	te as possible. If two married seded, copy the Additional Page, of any Additional Pages, write
_	you have any codebtors? (If	you are filing a joint case	, do not list eitner spouse	as a codeptor.	
■ No					
2 Wi	ithin the last & vears have you	Llived in a community r	aronerty state or territor	v2 (Community property	states and territories include
	ithin the last 8 years, have you ona, California, Idaho, Louisiana				states and territories include
Arizo		, Nevada, New Mexico, P	Puerto Rico, Texas, Wash		states and territories include
Arizo No Ye 3. In Co in lin Form	ona, California, Idaho, Louisiana b. Go to line 3. es. Did your spouse, former spouse column 1, list all of your codebte de 2 again as a codebtor only is	, Nevada, New Mexico, P use, or legal equivalent liv tors. Do not include you if that person is a guara	everto Rico, Texas, Wash we with you at the time? ur spouse as a codebtor antor or cosigner. Make	if your spouse is filing sure you have listed the 6G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
Arizo No Ye 3. In Co in lin Form	ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spouse olumn 1, list all of your codebt the 2 again as a codebtor only in 106D), Schedule E/F (Officia	, Nevada, New Mexico, P use, or legal equivalent livers. Do not include you if that person is a guara I Form 106E/F), or Sche	everto Rico, Texas, Wash we with you at the time? ur spouse as a codebtor antor or cosigner. Make	if your spouse is filing sure you have listed the 6G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fil ditor to whom you owe the debt
Arizo No Ye 3. In Co in lin Form	ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spouse olumn 1, list all of your codebt the 2 again as a codebtor only in 106D), Schedule E/F (Officia column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, P use, or legal equivalent livers. Do not include you if that person is a guara I Form 106E/F), or Sche	everto Rico, Texas, Wash we with you at the time? ur spouse as a codebtor intor or cosigner. Make	ington, and Wisconsin.) if your spouse is filing sure you have listed the legal of	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:
Arizo No Ye 3. In Co in lin Form out C	ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spouse olumn 1, list all of your codebt oe 2 again as a codebtor only in on 106D), Schedule E/F (Officia column 2. Column 1: Your codebtor	, Nevada, New Mexico, P use, or legal equivalent livers. Do not include you if that person is a guara I Form 106E/F), or Sche	everto Rico, Texas, Wash we with you at the time? ur spouse as a codebtor intor or cosigner. Make	ington, and Wisconsin.) if your spouse is filing sure you have listed the legal of	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:
Arizo No Ye 3. In Co in lin Form out C	ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spouse olumn 1, list all of your codebt the 2 again as a codebtor only in 106D), Schedule E/F (Officia column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, P use, or legal equivalent livers. Do not include you if that person is a guara I Form 106E/F), or Sche	everto Rico, Texas, Wash we with you at the time? ur spouse as a codebtor intor or cosigner. Make	ington, and Wisconsin.) if your spouse is filing sure you have listed the legal of	with you. List the person shown e creditor on Schedule D (Officia Schedule E/F, or Schedule G to find the debt of
Arizo No Ye 3. In Co in lin Form out C	ona, California, Idaho, Louisiana c. Go to line 3. es. Did your spouse, former spouse. Dlumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Officia Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, Puse, or legal equivalent livers. Do not include you if that person is a guaral Form 106E/F), or Sche	ve with you at the time? ur spouse as a codebtountor or cosigner. Make dule G (Official Form 10)	ington, and Wisconsin.) if your spouse is filing sure you have listed the legal of	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fil ditor to whom you owe the debt s that apply:
Arizo No Ye 3. In Co in lin Form out C	ona, California, Idaho, Louisiana c. Go to line 3. es. Did your spouse, former spouse. Dlumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Officia Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, Puse, or legal equivalent livers. Do not include you if that person is a guaral Form 106E/F), or Sche	ve with you at the time? ur spouse as a codebtountor or cosigner. Make dule G (Official Form 10)	if your spouse is filing sure you have listed the logo. Use Schedule D, S Column 2: The cred Check all schedules Schedule D, line Schedule E/F, line Schedule G, line	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt is that apply:

						ı				
	in this information to identify btor 1 Judith	your case: M Robotnik								
	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court	for the: _EASTERN DISTR	RICT OF MICHIGAN		_					
	se number					□ An		ed filing ent showin	g postpetition	chapter
0	fficial Form 106I						M / DD/ Y			
S	chedule I: Your	Income				1411	VI / DD/ 1			12/15
sup spo atta	as complete and accurate a plying correct information. use. If you are separated arch a separate sheet to this Describe Employ Fill in your employment	If you are married and not nd your spouse is not filin form. On the top of any ac	filing jointly, and your gwith you, do not inclu	spouse i ide inforr	s livi natio	ing with yon about	you, inclu your spo	ude inforr ouse. If m	nation about ore space is	your needed,
1.	information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment statu	☐ Employed ■ Not employed				☐ Emplo	•		
	employers.	Occupation	retired							
	Include part-time, seasonal self-employed work.	, or Employer's name								
	Occupation may include stu or homemaker, if it applies.		ss							
		How long employ	ed there?				_			
Par	Give Details Abo	ut Monthly Income								
Esti spou	mate monthly income as of use unless you are separated	the date you file this forn	ո. If you have nothing to ı	eport for a	any I	ine, write	\$0 in the	space. In	clude your nor	n-filing
-	ou or your non-filing spouse he e space, attach a separate sh		r, combine the information	on for all e	mplo	yers for t	hat perso	on on the li	nes below. If y	ou need
						For Deb	tor 1		btor 2 or ing spouse	
2.	List monthly gross wages deductions). If not paid mo	s, salary, and commission onthly, calculate what the mo		2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$		0.00	\$	N/A	

			Fo	r Debtor 1			Debtor 2		
	Copy line 4 here	4.	\$	0	.00	\$	g	N/A	
_	List all variable deductions.								-
5.	List all payroll deductions:	_	_						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$_		.00	\$_		N/A	_
	5b. Mandatory contributions for retirement plans	5b.	\$_		.00	\$_		N/A	_
	5c. Voluntary contributions for retirement plans	5c.	\$_		.00	\$_		N/A	_
	5d. Required repayments of retirement fund loans	5d.	\$_		.00	\$_		N/A	-
	5e. Insurance	5e.	\$_		.00	\$_		N/A	-
	5f. Domestic support obligations	5f.	\$_		.00	\$_		N/A	-
	5g. Union dues	5g.	\$_		.00	, \$ _		N/A	-
	5h. Other deductions. Specify:	5h.+	· -			+ \$_		N/A	=
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_		.00	\$_		N/A	-
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0	.00	\$_		N/A	-
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	monthly net income.	8a.	\$_		.00	\$_		N/A	_
	8b. Interest and dividends	8b.	\$_	0	.00	\$_		N/A	_
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c.	\$	0	.00	\$		N/A	
	8d. Unemployment compensation	8d.	\$.00	\$-		N/A	-
	8e. Social Security	8e.	\$-	1,291		\$_		N/A	-
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income		\$_ \$_	0	.00	\$_ \$_		N/A N/A	-
	8h. Other monthly income. Specify: food stamps	8h.+	- \$.00	+ \$ _		N/A	-
	· · · · · · · · · · · · · · · · · · ·		_			_			-
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,485	.00	\$_		N/A	A
10	Calculate monthly income. Add line 7 + line 9.	10. \$		1,485.00	+ \$		N/A :	= \$	4 40E 00
10.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,465.00	- ∥♥-		N/A	= \$ _	1,485.00
11.	State all other regular contributions to the expenses that you list in Schedule Include contributions from an unmarried partner, members of your household, your other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not Specify:	r depen					Schedule 11.		0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The result write that amount on the Summary of Schedules and Statistical Summary of Certa applies						12.	\$	1,485.00
								Combi	
13.	Do you expect an increase or decrease within the year after you file this form No.	1?					I	monthl	y income
	Yes. Explain:								

EIII	in this informa	tion to identify yo	our case:					
						Ob a st	20.00.10.10	
Deb	otor 1	Judith M Rol	botnik				if this is: an amended filing	
	otor 2 ouse, if filing)						supplement show	ring postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	AN		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your I	Expen	ses				12/15
info	ormation. If m		eded, atta	If two married people are chanother sheet to this factorial.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	o line 2. es Debtor 2 live i	in a separa	ate household?				
	□ N							
	□ Y	es. Debtor 2 mus	st file Officia	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						Yes
								□ No □ Yes
					-			□ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses of	penses include f people other tl d your depende	han $_{\square}$	No Yes				
Est exp	imate your ex		our bankru	y Expenses iptcy filing date unless y y is filed. If this is a supp				
the		h assistance and		government assistance if luded it on <i>Schedule I:</i> Y			Your expe	enses
-	_			_				
4.		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgage	4. \$		442.00
	If not includ	led in line 4:						
		estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		pkeep expenses Iominium dues		4c. \$ 4d. \$		0.00 170.00
5.				our residence, such as hor	me equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses 17-49227-mbm Doc 1 Filed 06/21/17 Entered 06/21/17 14:29:16 Page 37 of 55

page 2

Official Form 106J

Fill in thi	is information to identify your	case:			
Debtor 1	Judith M Robotni	k			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case nun	mber				
(if known)					☐ Check if this is an
					amended filing
Decla	I Form 106Dec aration About a	r, both are equally respor	nsible for supplying corr	ect information.	12/15
years, or	both. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Did	you pay or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
	No				
	Yes. Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the sum	mary and schedules filed	d with this declaration	on and
x /	/s/ Judith M Robotnik		X		
_	Judith M Robotnik Signature of Debtor 1		Signature of	Debtor 2	
I	Date _ June 21, 2017		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this	information to identify you				
	s information to identify you				
Debtor 1	Judith M Robotr First Name	Niddle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
	-				
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case num	ber			_	Check if this is an amended filing
	l Form 107 nent of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
informatio	nplete and accurate as possion. If more space is needed, known). Answer every que	attach a separate sheet to			
Part 1:	Give Details About Your Ma	arital Status and Where You	Lived Before		
1. What	is your current marital statu	ıs?			
	Married				
I	Not married				
2. Durin	g the last 3 years, have you	lived anywhere other than	where you live now?		
-	No				
_	Yes. List all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
Debt	or 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	Donna Mae nard, MI 48367	From-To: 2008-2016	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
states and	n the last 8 years, did you exterritories include Arizona, Ca	lifornia, Idaho, Louisiana, Ne hedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
4. Did y e Fill in	ou have any income from er the total amount of income yo are filing a joint case and you	nployment or from operatin ou received from all jobs and a	all businesses, including part	time activities.	endar years?
_	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	uary 1 of current year until ou filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,454.85	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

Amount you still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1 Judith M Robotnik		Cas	se number (if known		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Hunington Bank	last 3 months	\$762.00	\$13,971.88	☐ Mortgage)
	7575 Hunington Park Drive				■ Car	
	Columbus, OH 43235				☐ Credit Ca	ard
					☐ Loan Rep	payment
					☐ Suppliers	or vendors
					☐ Other	
	Union Home Mortgage	last 3m onths	\$1,326.30	\$65,725.00	■ Mortgage)
	PO Box 77404				☐ Car	
	Trenton, NJ 08628				☐ Credit Ca	ard
					Loan Rep	
					☐ Suppliers	•
					☐ Other	
	Insiders include your relatives; any general post which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	n control, or owner of 20%	or more of their voting	g securities; and a	any managing a	gent, including one fo
	No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cosm.		yments or transfer a	any property on a	account of a de	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	itor's name
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	■ No					
	Yes. Fill in the details.					
			_			
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		perty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
	No. Co to line 11					
	No. Go to line 11.					
	Yes. Fill in the information below.	December 11 D				W. 1 6 11
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	ed			, , ,

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	tor 1	Judith M Robotnik	Case number	(if known)				
		in 90 days before you filed for bankr unts or refuse to make a payment be	uptcy, did any creditor, including a bank or financial inscause you owed a debt?	stitution, set off any	amounts from your			
	_	No						
	□ '	Yes. Fill in the details.						
	Crec	ditor Name and Address	Describe the action the creditor took	Date action was taken	Amount			
		in 1 year before you filed for bankrup t-appointed receiver, a custodian, or	otcy, was any of your property in the possession of an a	assignee for the ben	efit of creditors, a			
		No						
	_	Yes						
Par		List Certain Gifts and Contributions						
					•			
13.	_	•	ptcy, did you give any gifts with a total value of more t	nan \$600 per person	?			
	_	No						
		Yes. Fill in the details for each gift.		_				
		s with a total value of more than \$600 person	Describe the gifts	Dates you gave the gifts	Value			
		son to Whom You Gave the Gift and ress:						
14.	_	in 2 years before you filed for bankru No	ptcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?			
		Yes. Fill in the details for each gift or contribution.						
	more	s or contributions to charities that to e than \$600	Describe what you contributed	Dates you contributed	Value			
		rity's Name ress (Number, Street, City, State and ZIP Code						
Par	t 6:	List Certain Losses						
	Withi		otcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
	_	No						
	П,	Yes. Fill in the details.						
			Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
			insurance dains on line 33 of Schedule AVB. Property.					
Par	t 7:	List Certain Payments or Transfers						
	cons	ulted about seeking bankruptcy or p	otcy, did you or anyone else acting on your behalf pay or reparing a bankruptcy petition? reparers, or credit counseling agencies for services required		erty to anyone you			
		No						
	_	Yes. Fill in the details.						
	Pers	son Who Was Paid	Description and value of any property	Date payment	Amount of			
	Add Ema		transferred	or transfer was made	payment			
		iiela Dimovski Attorney at Law P		6-2017	\$700.00			
	4420	00 Garfield Rd. Suite 124 iton Township, MI 48038						
	CC	Advising		6-8-17	\$9.76			
		-						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Judith M Robotnik Case number (if known)

17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or not include any payment or transfer that you lis No Yes. Fill in the details.	or to make payments			r transfer any propert	y to anyone who	
	Person Who Was Paid Address	Description and va transferred	llue of any prope	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or received or debts change	Date transfer was made	
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which yo beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details. 					f which you are a		
	Name of trust	Description and value of the property transferred			ed	Date Transfer was made	
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instrume sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of houses, pension funds, cooperatives, associations, and other financial institutions.			ments held in				
	■ No □ Yes. Fill in the details.						
		ast 4 digits of ccount number	Type of accoun instrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer	
 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other deposit cash, or other valuables? ■ No □ Yes. Fill in the details. 		ory for securities,					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		Describe the (contents	Do you still have it?	
22.	Have you stored property in a storage unit or p No Yes. Fill in the details.	place other than your I	nome within 1 ye	ear before yo	u filed for bankruptcy	7?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or ha to it? Address (Number, Str State and ZIP Code)		Describe the o	contents	Do you still have it?	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Judith M Robotnik Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any propo	erty y	ou borrowed from, are storing for	r, or hold in trust		
	No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value		
Pai	t 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, grou	_	•			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.					
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		us wa	ste, hazardous substance, toxic s	substance,		
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of who	en the	ey occurred.			
24.	Has any governmental unit notified you that you	ı may be liable or potentially liab	le und	der or in violation of an environm	ental law?		
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	strative proceeding under any en	viron	mental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Pai	t 11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	lid you own a business or have a	any of	f the following connections to any	y business?		
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity	y, eith	ner full-time or part-time			
	☐ A member of a limited liability company	(LLC) or limited liability partners	ship (I	LLP)			
	☐ A partner in a partnership						
		ive of a corporation					
	_	An owner of at least 5% of the verting or equity executives of a corporation					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Der	IOI I Judith IVI Robotnik	Cas	se number (if known)
	■ No. None of the above applies. Go to F	Part 12.	
	Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to an	nyone about your business? Include all financial
	No		
	Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	12: Sign Below		
are t		false statement, concealing property, or ol	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/	Judith M Robotnik		
	lith M Robotnik nature of Debtor 1	Signature of Debtor 2	
Dat	June 21, 2017	Date	
Did	ou attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
■ N	0		
ПΥ	es		
Did :	you pay or agree to pay someone who is not	t an attorney to help you fill out bankruptcy	forms?
_	o es. Name of Person . Attach the <i>Bankru</i>	ntcy Petition Preparer's Notice Declaration a	and Signature (Official Form 119)
	/ table of the banking	proj i dation i roparor o rivottoo, Docidiation, a	na orginataro (omolari omi 110).

United States Bankruptcy Court Eastern District of Michigan

In re	Judith M	Robotnik		Case No).			
-			Debtor(s)	Chapter	7			
		STATEMENT OF AT PURSUANT TO	TORNEY FOR D F.R.BANKR.P. 20					
	The unders	signed, pursuant to F.R.Bankr.P. 2016(b), states that	nt:					
1.	The unders	signed is the attorney for the Debtor(s) in this case.						
2.	The compe	ensation paid or agreed to be paid by the Debtor(s)	to the undersigned	is: [Check one]				
	[X] <u>I</u>	FLAT FEE						
		For legal services rendered in contemplation of an exclusive of the filing fee paid			700.00			
	B.	Prior to filing this statement, received			700.00			
	C.	The unpaid balance due and payable is			0.00			
	[]	RETAINER						
	A.	Amount of retainer received						
		The undersigned shall bill against the retainer at a agreed to pay all Court approved fees and expense			nourly rate schedule.] Debtor(s) have			
3.	\$ 335.00	0 of the filing fee has been paid.						
4.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]							
	A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptey;							
	B. I	B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;						
	 C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; D. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 							
	E.——I	Reaffirmations;	igo una omer come.	stee cannicaptely matter	,			
		Redemptions; Other:						
		Per Retainer Agreement						
5.		nent with the debtor(s), the above-disclosed fee doe Per Retainer Agreement	s not include the fo	llowing services:				
6.	The source	The source of payments to the undersigned was from:						
	Α.	XX Debtor(s)' earnings, wages, comp		es performed				
	В	Other (describe, including the ide		-				
7.		signed has not shared or agreed to share, with any on, any compensation paid or to be paid except as for		than with members of	the undersigned's law firm or			
Dated:	June 21	1, 2017	_	/s/ Daniela Dimov	ski			
				44200 Garfield Ro Clinton Township	P60278 Attorney at Law P.C. ad Suite 124			
Agreed:	/s/ Judi	th M Robotnik						
Č	Judith	M Robotnik	-					
	Debtor			Debtor				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Judith M Robotnik		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATION OF CREDITOR MATRIX			
Γhe ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and c	correct to the best	of his/her knowledge.
Date:	June 21, 2017	/s/ Judith M Robotnik		

Signature of Debtor

A Convergys Company 400 N Rogers Rd PO Box 3330 Olathe, KS 66063

Alliance Health Professionals 2689 Solution Center Chicago, IL 60677

Allied Interstate 3000 Corporate Exchange Dr 5th Floor Columbus, OH 43231

AmeriCredit PO Box 78143 Phoenix, AZ 85062

Andover Heights Condo Association c/o Stamper and Company 42822 Garfield Ste 105 Clinton Township, MI 48038

Avant 222 N Lasalle Street, Ste 1700 Chicago, IL 60601

Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492

Capital One Retail Services PO Box 4144 Carol Stream, IL 60197-4144

Cardmember Service PO Box 94014 Palatine, IL 60094

Cavalry Portfolio PO Box 27288 Tempe, AZ 85285 Comenity Bank
Bankruptcy Department
PO Box 183043
Columbus, OH 43218-3043

Concentra Urgent Care PO Box 669 Addison, TX 75001

Discover Card PO Box 6103 Carol Stream, IL 60197

DSRM National Bank PO Box 300 Amarillo, TX 79105

EGS Financial Care, Inc PO Box 1020 Dept 806 Horsham, PA 19044

Fite Eye Center PO Box 380803 Clinton Township, MI 48038

Ghanshyam Patel MD PC PO Box 380476 Clinton Township, MI 48038

Henry Ford Health System PO Box 553920 Detroit, MI 48255-3920

Home Depot Credit Services PO Box 78011 Phoenix, AZ 85062

Huntington Bank 7575 Huntington Park Drive Columbus, OH 43235

Kohl's PO Box 2983 Milwaukee, WI 53201 Macy's PO Box 78008 Phoenix, AZ 85062

Receivable Solutions Specialist, Inc PO Box 669 Natchez, MS 39121

Sears Credit Cards PO Box 78051 Phoenix, AZ 85062

Synchrony Bank Attn: Bankruptcy Dept. PO Box 965061 Orlando, FL 32896-5061

Target Card Services PO Box 660170 Dallas, TX 75266-0170

Union Home Mortgage PO Box 77404 Trenton, NJ 08628